

# MICHIGAN PEDIATRIC DENTISTRY EXAMINATION BROCHURE

Be sure that you have submitted your examination application and appropriate fee to the Bureau of Health Professions, Department of Community Health, prior to the deadline date of **April 15, 2009** in order to be scheduled for the examination. If you have questions regarding the application process, you may call the Bureau at (517) 335-0918 or send an e-mail to [BHPHELP@michigan.gov](mailto:BHPHELP@michigan.gov).

If you have not received an application, you can obtain one at the following web site: [www.michigan.gov/healthlicense](http://www.michigan.gov/healthlicense).

# **2009**

## **PEDIATRIC DENTISTRY EXAMINATION BROCHURE**

### **INTRODUCTION:**

The licensing examination for Pediatric Dentistry is designed to measure the knowledge, skills and abilities deemed essential to protect the public's health, safety and welfare.

### **EXAMINATION SCHEDULE:**

The Pediatric Dentistry examination will be given on **June 1 – 2, 2009**. After the Bureau has approved you to take the examination, an Admission Letter will be sent to you approximately two weeks prior to the examination. This document will specify the room to which you must report for the examination. Even if you are taking only one part of the examination, you must report to the examination room by no later than **8:15 a.m.** on the first day. A general schedule of the examination is included below.

The test center is located at the University of Michigan, School of Dentistry, Ann Arbor, MI. Information regarding the location of the site can be found at the back of the brochure. Parking may be a problem and should be factored into your driving schedule. You should be prepared to pay a parking fee.

<b>DATE</b>	<b>TIME</b>	<b>PROCEDURE</b>
Day 1	8:15 A.M.	Submission of the two required case histories
	9:00 A.M.	Written Examination (2 ½ hours)
	12:30 P.M.	Oral Examinations will be scheduled on an individual basis (1 hour)
Day 2	8:30 A.M.	Case Analysis section will be scheduled on an individual basis (1 ½ hours)

**NOTE:** Depending upon the number of candidates, the Case Analysis section may be conducted and completed during the afternoon of the first day. However, since this will not be determined until the first day of the exam, candidates should plan on being at the examination site for both days.

### **SPECIAL ACCOMMODATIONS:**

If you require special accommodations because of a disability, a letter that specifies the disability and requested accommodation(s) must be submitted to the Bureau of Health Professions. A physician or other licensed professional qualified to diagnose and treat the disability must provide detailed documentation of the disability.

Requests for accommodations must be received no later than April 15, 2009. Because of the time required to review documentation and the possible need for additional information, your request should be mailed as early as possible. A letter approving or denying your request will be sent following the review of information submitted.

Submit your request and relevant documentation to:

Lucinda Clark  
Bureau of Health Professions  
MI Department of Community Health  
PO Box 30670  
Lansing, MI 48909

### **PRE-EXAMINATION ASSISTANCE**

Depending upon the issue, dental specific questions regarding the examination may be answered by Dr. Daniel Carroll who can be reached at (810) 733-5310.

### **ADMISSION REQUIREMENTS**

In order to be admitted to EACH part of the examination you MUST:

1. **BE ON TIME:** You will NOT be admitted after the examination has begun.
2. **PRESENT THE ADMISSION LETTER** that will be sent to you approximately two weeks prior to the examination. If you have not received an Admission Letter one week prior to the exam, call the Bureau of Health Professions, Department of Community Health, at (517) 335-0918. If you do not have an Admission Letter, you may still be admitted to the examination provided that your name is included on the site roster. A substitute Admission Letter will be prepared for you at the time of check-in. At the conclusion of the examination, your Admission Letter will be collected and retained. It is your responsibility to turn in your Admission Letter to the testing staff at the conclusion of the examination.
3. **PRESENT OFFICIAL SIGNED PHOTOGRAPHIC IDENTIFICATION.** Acceptable identification includes a valid Michigan driver license or another state issued driver license, Secretary of State Identification, passport, or government-issued identification. The identification presented **MUST** be an official document and include BOTH a photograph and signature. Without the required identification, you will not be permitted to take the examination.

If you do not present the required signed photographic identification or you are late to the scheduled examination section, you will NOT be allowed to take the examination/section and you will forfeit your examination fee. You will be required to submit a new examination application and fee for the next regularly scheduled exam.

### **CANDIDATE ANONYMITY**

You will be assigned a unique candidate identification number that will be included on your Admission Letter. With the exception of the written examination, you should record **ONLY** your candidate number on all examination materials to be scored. To maintain confidentiality, you should NOT introduce yourself by name to the examiners nor include your name, academic program, or hospital on your cases.

### **EXAMINATION CONDUCT**

No reference materials may be utilized during any part of this examination. Textbooks, notebooks, briefcases, large purses, pagers, cell phones, and beepers should NOT be brought to your seat. Neither the State nor the University will be responsible for any loss of items brought to the examination site.

Cheating is defined as any activity, behavior or procedure that a candidate employs that would enable him/her to pass an examination by dishonest, fraudulent, or deceitful means. Examples of cheating would include, but are not limited to, obtaining answers from other candidates, copying from another's answer sheet, copying the examination, removing or attempting to remove test materials or notes from the examination room, using prepared notes during the examination, discussing the examination with others during the examination, referring to textbooks, informing other candidates of the oral questions prior to their taking that section, or having someone take the examination for another individual.

Anyone found involved with any of the above activities or behaviors may be denied licensure.

You will be required to sign a statement, at the time of the examination, agreeing to not divulge the contents of the examination.

### **MATERIALS TO BE BROUGHT TO THE EXAMINATION**

You will need to supply the following items at the time of the examination.

1. Two **#2** lead pencils for the written examination
2. A tape recorder and tape(s). The tape will be retained at the conclusion of each taped section of the examination. You will need to have sufficient tapes for at least two 90-minute sections. **Make certain that the tape recorder works.** The quality of the recording is your responsibility. If you fail to bring a recorder or it does not operate properly, you will not be permitted to review and/or appeal your results should you fail either of the oral sections. You must turn in your tape(s) to the testing staff at the conclusion of each oral section.
3. Two case histories as described later in this brochure.

## **EXAMINATION FORMAT**

The examination is divided into **THREE** sections: Written, Oral and Case Analysis/Case Histories. Each section has a total point value of 100 points.

### **I. Written Examination**

This portion of the examination will consist of 100 multiple-choice questions. The allotted time for the written section is 2 ½ hours. Each question is worth one point.

The written examination may include, but not be limited to, the following topics:

1. Behavior Management
2. Cranio-Facial Growth
3. Oral/Dental Anatomy (Histological and Gross)
4. Dental Materials
5. General Anesthesia for Infants and Children
6. Growth of the Child
7. Hospital Dentistry & Minor Oral Surgery
8. Occlusal Development
9. Oral Pathology
10. Pedodontic Orthodontics
11. Pedodontic Internal Medicine (Oral Medicine)
12. Pharmacology
13. Preventive Dentistry & Dental Health
14. Psychology of Child Development
15. Pulp Management
16. Radiology
17. Restorative Procedures
18. Trauma

Your answers to the multiple choice items **MUST** be recorded on the machine scorable answer sheet that will be provided. All marks must be entered with a #2 lead pencil and must be **DARK**. Be sure that no stray marks appear on the answer sheet as they may be read as answers. If you change your mind on an item, make sure to erase the incorrect answer completely.

It is best to answer all items, even if you are not sure of the answer. There is **NO PENALTY** for guessing. There is **ONE BEST** answer for each item.

**NOTE:** If you have passed the American Board of Pediatric Dentistry written examination, you can waive the written portion of the Michigan examination. The American Board must submit a letter verifying passage of the American Board written examination to:

Bureau of Health Professions, Application Unit  
MI Department of Community Health  
PO Box 30670  
Lansing, MI 48909

## **II. Oral Examination**

This portion of the exam must be tape recorded by you.

You will be examined on an individual basis for approximately one hour. Slides, information, and/or other material will be used to generate questions asked of you. Each candidate will be asked the same initial set of questions and will be presented with the same slides and/or material. The examiners may ask additional questions if they feel you are deficient in certain areas. A total of 100 points is possible on this portion of the exam.

A sample of a typical oral question is:

*You are shown a slide of an intrusion of a three-year-old's central incisor. The examiner may ask you to make a diagnosis of the problem, indicate an appropriate treatment plan, specify the prognosis, or ask for the possible sequelae.*

## **III. Case Analysis /Case Histories Examination**

This portion of the exam must be tape recorded by the candidate.

Each Case History you submit is worth 10 points. Each case presented in the Case Analysis section is worth 10 points. The Case Analysis/Case Histories section has a total point value of 100 points.

The **Case Analysis** examination is designed to enable you to demonstrate your ability to diagnose and plan the treatment for specific dental problems. Eight (8) cases will be presented by the examiners and will cover typical pediatric dental problems that would be encountered in practice. These cases will involve (a) Interceptive orthodontics, (b) Trauma, (c) Complete restoration, (d) Pulpal therapy, and (e) Developmental anomalies. You will be evaluated on your diagnosis of the problem, treatment plan, and organization of your response. You will be given approximately 90 minutes to complete the Case Analysis section.

You must also submit **two (2) completed case histories and treatment records** as described below. Include your candidate number **ONLY** on each case history that you present. Do NOT include your name or program.

The case histories must be developed from patients treated by you. The histories submitted should demonstrate that quality service was provided.

All case histories should be typewritten and contained in a single folder or binder. All materials should be labeled clearly and neatly with your **candidate number**, the case designation, patient's first name or initials only, and the dates that treatment was instituted and completed. All references to the educational institution, treatment facility and/or mentor information must be deleted. **Do not include your name or other identifying information, other than candidate number, on the case histories.**

In documenting the cases, you should provide the necessary information and be complete without being wordy. You should use the ABPD guidelines as you develop your cases. It is not necessary to include a review of the literature unless the method of treatment or technique used is not well known (reference pertinent literature). Examples of potential errors in case histories are provided at the end of this section.

When you submit your case histories to the test administrator, you **MUST** include a separate signed statement stipulating that you completed all of the dental work shown in the case histories **OR** that another dentist completed certain specified procedures. This statement must be signed and dated.

### **The Required Case Histories are:**

One case of a patient with a quadrant requiring back-to-back Class II amalgam or posterior resin restorations of the two primary molars. (i.e. a mesial-occlusal restoration of the primary second molar and a distal-occlusal restoration of the primary first molar).

One case of a patient with a single quadrant that has a primary molar requiring either a vital pulpotomy or pulpectomy and restoration with a stainless steel crown.

For both cases, the documentation is limited to the single quadrant only and should include:

1. Treatment plan for the quadrant only.
2. Preoperative radiograph appropriate for the findings and proposed treatment. Radiographs should be labeled, including the date, and of good quality. Bite wings for Class II and PAs and lower bite wings for pulp.
3. A detailed description of all restorative and pulpal treatment procedures for the quadrant only. Include the medical history, behavior, medications used and the amount, etc.
4. Justification of treatment.

5. A post-treatment radiograph of the quadrant that is appropriate for the treatment performed. Generally, this would be a routine radiograph taken at a recall visit, but it may be taken at a follow-up visit of less than six months, but not less than three months, duration.
6. Evaluation of the treatment as documented on the post-treatment radiograph.
7. Documentation of any appropriate follow-up treatment.

The cases should comply with the ABPD Guidelines.

Digital radiographs and copies of computer records are acceptable provided they are of high quality.

### **Evaluation Criteria:**

Any case that fails to meet the above case requirements will **NOT** be reviewed and will automatically receive zero (0) points. The Case Histories will be evaluated using the following criteria.

1. Diagnosis and Justification of Treatment (4 points)
  - a. Diagnosis
  - b. Justification of treatment
  - c. Defined objective of treatment
  - d. Treatment appropriate for patient's problem
  - e. Research/literature supporting the chosen treatment (if necessary)
2. Pre-treatment Records (2 points)
  - a. Quality radiograph(s)
  - b. An adequate number and type of radiograph(s) for the case
  - c. Clinical findings
3. Quality of Treatment (2 points)
  - a. Timing and duration
  - b. Affect on other tissues
  - c. Appropriate pulp therapy, restorative materials and restorative treatment
4. Post-treatment Records (2 points)
  - a. Documentation of treatment success: clear, neat, and adequate
  - b. Prognosis
  - c. Repeated diagnostic records, as needed



## **Examples of Errors Associated with Case Histories**

### **Radiographic Examination**

Failure to record abnormalities that appear on the radiograph

### **Radiographic Technique**

Radiographs that are elongated, foreshortened or cone cut. Periapical radiographs that do not show root ends, furcation area, and surrounding bone clearly. Bitewing radiographs that have overlapping contact of the teeth and radiographs with blurred images.

### **Quality of Radiographs**

Radiographs that are too light or too dark and have no contrast. Radiographs that are chemically stained.

### **Excessive/Insufficient Number of Radiographs**

Taking too many radiographs or failing to submit the appropriate number.

### **Wrong type of Radiographs**

Radiographs that are incorrect to properly diagnose.

### **Cavity Preparation for Amalgam Or Posterior Resin Restoration**

Eliminating the gingival floor or failing to break contact with adjacent teeth in Class II preparation. Excessive flare of proximal outline. Creating a pulp exposure or excessive destruction of tooth material during cavity preparation of an incipient lesion.

### **Amalgam or Posterior Resin Restorations**

Amalgam/resin flash overlying cavosurface margin. Absence of proximal contact when applicable. Amalgam/resin overhang at gingival wall. Improper proximal contour of restoration.

### **Stainless Steel Crown**

The use of stainless steel crown without documented justification. Overextending the cervical margins of the crown. Improper adaptation of crown at cervical margin. Opening the bite with cemented crown. Failure to remove cement from gingival sulcus. Inadequate contact with proximal teeth when applicable. Marring the surface of an adjacent tooth during preparation. Failure to use a stainless steel crown on a tooth that has had a pulpotomy or pulpectomy (depending upon the age of patient).

## **SCORING THE EXAMINATION**

The written examination will be machine scored. At least two examiners will evaluate all other sections of the examination. Each examiner will evaluate the sections independently and the final score for each section will be the average of the examiners' scores.

During the course of the examination, the examiners may use expressions such as "That's okay" or "Fine". These comments should **NOT** be construed as anything other than a polite way of completing a checkpoint.

In order to pass the examination, you must receive a score of 75% in **EACH** section of the examination. Those sections in which you receive a score of **LESS** than 75% may be repeated once within an 18-month period. Should you not receive a 75% in each section during the second attempt, you will need to retake the entire examination.

Your score(s) will be released in approximately six weeks following the last day of your examination. Results will **NOT** be provided over the phone nor will they be released to a third party unless you have submitted a signed written request to the Bureau of Health Professions for the release of your results to a specific third party.

If you receive a score of **PASS**, this will be the only information available as to your success on the examination. Actual numeric scores are **NOT** available.

If you **FAIL** the examination, your numeric score along with a breakdown of your performance on each section failed will be provided. This information is intended to assist you in preparing for the re-examination.

## **REVIEW OF FAILED EXAMINATION**

Should you fail an examination section, you may request a personal review of the examination documents.

1. Complete the Request for Review form that will be included with your Notice of Failure, along with a cashier's check or money order in the amount of \$50.00 made payable to the "State of Michigan". Send the form and payment within thirty (30) calendar days of the Notice of Failure date to:

Dr. Kara Schmitt  
KNK Consulting  
2956 Dobie Road  
Mason, MI 48854

2. The review will be conducted in the Lansing area. A specific time and location will be included with your Notice of Failure.
3. The review will be limited to a sight review ONLY. You will have one-half the amount of time as originally provided for the administration of the failed section (*i.e.*, if two hours were allocated for the administration of the section, you would have one hour for the review of that section). Notes made by you during the review may not be removed from the room nor copied. Reference material may be brought to the review.
4. The review will be limited to the area(s) of failure ONLY.
5. At the conclusion of the review, you must decide whether or not you wish to appeal your results. If you decide to appeal, you may submit for consideration any information or documentation that pertains to the failed section(s) of the examination.
6. All questions, comments, and documentation made by you will be submitted to the Pediatric Dentistry Examination Committee for review. The committee's decision will be forwarded to the Michigan Board of Dentistry.
7. The Michigan Board of Dentistry will take action on the recommendation(s) presented.
8. Following the Board's decision, the Bureau of Health Professions will notify you of the results of your appeal.

## SUGGESTED REFERENCE LIST

The following books and journals are presented to assist you in your preparation for the examination. An effort is made to use a textbook's most current edition. The references are suggestive in nature; therefore, the list is NOT ALL INCLUSIVE.

ADA Guide to Dental Therapeutics. American Dental Association.

American Society of Dentistry for Children Journal

Andreasen, J.O. Essentials of Traumatic Injuries of the Teeth, Saunders

Avery, James K. (ed.) Oral Development and Histology, Williams and Wilkins

Bhaskar, Orban's Oral History and Embryology, Mosby

Braham, Raymond L. and Morris, Merle E. Textbook of Pediatric Dentistry, Williams and Wilkins, Baltimore.

Budnick, Steven D. Handbook of Pediatric Oral Pathology, Year Book Medical Publishers, Inc.

Cohen, S. & Burns, R.C. Pathways of the Pulp, Mosby

Craig, Robert G & Powers, John M. Restorative Dental Materials, Mosby

Davis, Law & Lewis. An Atlas of Pedodontics, Saunders Co.

Frommer, Herbert H. Radiology for Dental Auxiliaries

Goth, Andres. Goth's Medical Pharmacology, Mosby

Journal of American Dental Association

Krugman, Saul et al., Infectious Diseases of Children, Mosby

Little, James et al. Dental Management of the Medically Compromised Patient, Mosby

McCabe, John F. Applied Dental Materials, Blackwell Scientific Publications, Oxford, England

McDonald, Ralph E. & Avery, David R. Dentistry for the Child and Adolescent, Mosby

Malamed, Stanley F. Handbook of Local Anesthesia, Mosby

Malamed, Stanley F. Medical Emergencies in the Dental Office, Mosby

Malamed, Stanley F. Sedation: A Guide to Patient Management, Mosby

Moffett, Hugh, Pediatric Infectious Diseases, Lippincott

Monheim, Leonard M. Local Anesthesia and Pain Control in Dental Practice, Mosby

Moyers, Robert E. Handbook of Orthodontics for the Student and General Practitioner, Yearbook Medical Publishers

Nowak, Arthur (ed). Dentistry for the Handicapped Patient, Mosby

Pediatric Dentistry Journal

Physician Desk Reference

Pinkham, James, Pediatric Dentistry: Infancy through Adolescence, Saunders

Proffit, William R. Contemporary Orthodontics, Mosby

Ramfjord, Sigurd P. & Ash, Major M. Periodontology and Periodontics, Saunders

Regezi, Joseph and Sciubba, James. Oral Pathology, Saunders

Rose, Louis & Kaye, Donald, Internal Medicine for Dentistry, Mosby

Shafer, William G., et al. A Textbook of Oral Pathology, Saunders

Vaughan III, Victor C. et al. Nelson Textbook of Pediatrics, Saunders

Wei, Stephen H. Pediatric Dentistry and Orthodontics: Total Patient Care, Lea Febriger Co.

Wright, Gerald Z. et al. Managing Children's Behavior in the Dental Office, Mosby

Wynn, Meiller & Crossley. Drug Information Handbook for Dentistry, Lexi-Comp

**UNIVERSITY OF MICHIGAN  
SCHOOL OF DENTISTRY**

**1011 North University Avenue  
Ann Arbor, MI**

**Located at the corner of North University and Fletcher Streets  
Across from the Michigan League**

**For more accurate address and parking information, you can access  
the school's web site at: [www.dent.umich.edu](http://www.dent.umich.edu) then enter "parking" in  
the search box.**

**Candidates generally use visitor parking at the Palmer Structure,  
located off Washtenaw Avenue (where it bends and becomes E.  
Huron Street).**

**Once in the Visitor Parking (P1 level), go to the South/Stairwell  
elevator in the SW corner of the structure.**

**Take the South elevator to Level P4.**

**Walk left from the elevator through 2 sets of glass doors. The School  
of Dentistry is the large brick building to your right when you reach  
the outside.**

**For local accommodations, click on the Ann Arbor Convention Bureau  
website at:  
[www.annarbor.org](http://www.annarbor.org)**